## 450000 18784

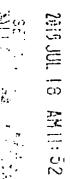
(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Certified Copies Certificates of Status				
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## **COVER LETTER**

TO: Registration Section Division of Corpo			
SUBJECT:	GUENIEW WINDOWS E' DOORS LIC		
	Name of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered A	agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspon	dence concerning this matter to the following:		
	DENERS		
N	ame of Person		
GULFVI	EW WINDOWS E' DOORS		
Fi	rm/Company		
47270	3RD ANE E.		
	Address		
BRADE	JON, FL 34708		
City/S	State and Zip Code		
JD@ GOLFY	IEWWINDOWS. COM		
E-mail address: (to b	e used for future annual report notification)		
For further information co	ncerning this matter, please call:		
JORDAN DE	uers at (941 ) 725 · 0974		
Name of F			
STREET/COUR			
Registration Section Registration Section Division of Corporations Division of Corporations			
Clifton Building	rations Division of Corporations P.O. Box 6327		
2661 Executive Co Tallahassee, Florid	enter Circle Tallahassee. Florida 32314		
Enclosed is a chec	k for the following amount:		
<b>△</b> \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy		
INHS18 (2/14)			

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Na	ame of the limited liability company:GULFYIEW	MINDOWS	ei, Doores	
2. (a)		(b)		
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	04/25/2019		L15000018784	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:    1401 814 ANE. W.   Registered Office Address   (MUST BE FLORIDA STREET ADDRESS)			
(b)	BENDENTON FL.	34217	7319 JUL 18	
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office address:		
	107 133RD STREET EAST  NEW Registered Office Address:		<u> </u>	
	BRADENTON .FL	34212		
the cha agent v was/was/wathe arti Signa I here provision the obi	imited liability company is not organized under the lawsunge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liabered of a member of a member by accept the appointment as registered agent and agreeions of all statutes relative to the proper and complete points of my position as registered agent as provided ely reflect a change in the registered office address. I he dim writing of this change.	he registered off bility company, i the limited liability c imited liability c	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.  JORDAN DE MERS  Printed or typed name of signee  apacity. I further agree to comply with the	